Case 1:19-cv-02698-DLF Document 1-7 Filed 09/09/19 Page 1 of 2 CIVIL COVER SHEET

I. (a) PLAINTIFFS	Is-44 (Rev. 6/17 DC) I. (a) PLAINTIFFS			DEFENDANTS					
CAUSE OF ACTION INSTITUTE			U.S. DEPARTMENT OF COMMERCE						
1875 Eye Street, N.W., Suite 800			1401 Constitution Avenue, N.W.						
Washington, D.C. 20006			Washington, D.C. 20230						
(b) COUNTY OF RESIDENCE OF FIRST LISTED PLAINTIFF 11001 (DC)			COUNTY OF RESIDENCE OF FIRST LISTED DEFENDANT(IN U.S. PLAINTIFF CASES ONLY)						
(EXCEPT IN U.S. PLAINTIFF CASES) (c) ATTORNEYS (FIRM NAME, ADDRESS, AND TELEPHONE NUMBER)			NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE TRACT OF LAND INVOLVED						
	, AND TELEPHONE NUMBER)	ATTORNEYS (IF KNO	JWIN)						
Ryan P. Mulvey Cause of Action Institute									
1875 Eye Street, N.W., Suite	800								
Washington, D.C. 20016	(202) 400-4232								
	(_3_,								
II. BASIS OF JURISDICTION			III. CITIZENSHIP OF PRINCIPAL PARTIES (PLACE AN x IN ONE BOX FOR PLAINTIFF AND ONE BOX FOR DEFENDANT) FOR DIVERSITY CASES ONLY!						
(PLACE AN x IN ONE BOX ONLY)		rlainiiff	PTF	DFT	I) <u>FUK DIVI</u>	ERSITT CASES UNLY!	PTF	DFT	
	deral Question S. Government Not a Party)	Citizen of t	this State 0 1	O 1		ated or Principal Place	O 4	O 4	
	iversity ndicate Citizenship of	Citizen of Another State 2		2 O 2 Incorpora		ated and Principal Place	O 5	O 5	
	rties in item III)	Citizen or S	Subject of a 3	O 3	oi Busine	ess in Another State			
		Foreign Co		٥	Foreign N	Vation	O 6	O 6	
	IV. CASE ASSIG	NMENT	AND NATURE	OF SIIIT	<u> </u>				
(Place an X in one categ	ory, A-N, that best repres					onding Nature of Su	it)		
O A. Antitrust O B. H	Personal Injury/	0	C. Administrativ	e Agenc	\mathbf{y}	O D. Tempora	ry Resti	raining	
Malpractice			Review			Order/Preliminary			
410 Antitrust 310 A	rplane		151 Medicare Act			Injunctio	n		
	rplane Product Liability					Any nature of suit fr	om anv ce	ategory	
320 Assault, Libel & Slander			Social Security			Any nature of suit from any category may be selected for this category of			
	· · · · · · · · · · · · · · · · · · ·					may be selected for t	his catego	ory of	
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O G. Habeas Corpus/ 2255	O H. Employment Discrimination	O I. FOIA/Privacy Act	O J. Student Loan						
530 Habeas Corpus – General 510 Motion/Vacate Sentence 463 Habeas Corpus – Alien Detainee	442 Civil Rights – Employment (criteria: race, gender/sex, national origin, discrimination, disability, age, religion, retaliation)	895 Freedom of Information Act 890 Other Statutory Actions (if Privacy Act)	152 Recovery of Defaulted Student Loan (excluding veterans)						
	(If pro se, select this deck)	*(If pro se, select this deck)*							
K. Labor/ERISA (non-employment) 710 Fair Labor Standards Act 720 Labor/Mgmt. Relations 740 Labor Railway Act 751 Family and Medical Leave Act 790 Other Labor Litigation 791 Empl. Ret. Inc. Security Act	L. Other Civil Rights (non-employment) 441 Voting (if not Voting Rights Act) 443 Housing/Accommodations 440 Other Civil Rights 445 Americans w/Disabilities – Employment 446 Americans w/Disabilities – Other 448 Education	M. Contract 110 Insurance 120 Marine 130 Miller Act 140 Negotiable Instrument 150 Recovery of Overpayment & Enforcement of Judgment 153 Recovery of Overpayment of Veteran's Benefits 160 Stockholder's Suits 190 Other Contracts 195 Contract Product Liability 196 Franchise	N. Three-Judge Court 441 Civil Rights – Voting (if Voting Rights Act)						
V. ORIGIN									
O 1 Original Proceeding from State Court C									
VI. CAUSE OF ACTION (CITE THE U.S. CIVIL STATUTE UNDER WHICH YOU ARE FILING AND WRITE A BRIEF STATEMENT OF CAUSE.) Freedom of Information Act, 5 U.S.C. § 552: Failure to Respond to Requests; Unlawful Policy or Practice									
VII. REQUESTED IN COMPLAINT	CHECK IF THIS IS A CLASS ACTION UNDER F.R.C.P. 23 DEMAND JU	S Check Y YES T	TES only if demanded in complaint NO NO						
VIII. RELATED CASE(S) IF ANY	(See instruction) YES	NO K If yes, p	lease complete related case form						
DATE:09/09/2019	SIGNATURE OF ATTORNEY OF REC	CORD /s/ Ryan F	P. Mulvey						

INSTRUCTIONS FOR COMPLETING CIVIL COVER SHEET JS-44 Authority for Civil Cover Sheet

The JS-44 civil cover sheet and the information contained herein neither replaces nor supplements the filings and services of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. Consequently, a civil cover sheet is submitted to the Clerk of Court for each civil complaint filed. Listed below are tips for completing the civil cover sheet. These tips coincide with the Roman Numerals on the cover sheet.

- I. COUNTY OF RESIDENCE OF FIRST LISTED PLAINTIFF/DEFENDANT (b) County of residence: Use 11001 to indicate plaintiff if resident of Washington, DC, 88888 if plaintiff is resident of United States but not Washington, DC, and 99999 if plaintiff is outside the United States.
- III. CITIZENSHIP OF PRINCIPAL PARTIES: This section is completed <u>only</u> if diversity of citizenship was selected as the Basis of Jurisdiction under Section II.
- IV. CASE ASSIGNMENT AND NATURE OF SUIT: The assignment of a judge to your case will depend on the category you select that best represents the <u>primary</u> cause of action found in your complaint. You may select only <u>one</u> category. You <u>must</u> also select <u>one</u> corresponding nature of suit found under the category of the case.
- VI. CAUSE OF ACTION: Cite the U.S. Civil Statute under which you are filing and write a brief statement of the primary cause.
- VIII. RELATED CASE(S), IF ANY: If you indicated that there is a related case, you must complete a related case form, which may be obtained from the Clerk's Office.

Because of the need for accurate and complete information, you should ensure the accuracy of the information provided prior to signing the form.